

**Testimony of John Peller, AIDS Foundation of Chicago
to the Illinois Health Reform Implementation Council on
Implementation of Health Insurance Exchanges**

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Thanks to leadership from our elected officials, Illinois has a long history of leadership in the fight against HIV/AIDS. The new health reform law gives Illinois unprecedented opportunities to implement innovative, cost-effective programs that will dramatically improve the lives of people living with HIV and reduce transmission of the virus.

We urge you to consider the following issues when developing the exchanges and implementing provisions related to private health insurance:

- **Transform the AIDS Drug Assistance Program (ADAP) into a wrap-around prescription drug program:** ADAP provides life-saving prescription drug coverage to people living with HIV. AIDS Foundation of Chicago (AFC) estimates that about half of ADAP clients will be newly covered by Medicaid and half will be enrolled in the exchanges.

Illinois should transform ADAP into a wrap-around prescription drug benefit program that helps people with HIV afford premiums and out-of-pocket costs of prescription drugs, similar to Illinois Cares Rx. For many low-income people with HIV, the federal premium subsidies and affordability provisions will be inadequate and plans will be unaffordable, meaning they won't have access to medications. It will be far less expensive for Illinois to spend a small amount of money on premiums and out-of-pocket costs for HIV medications that keep someone healthy and working than to have them become disabled and eligible for Medicaid.

- **Plans sold on the exchanges must guarantee access to safety-net providers:** Plans sold on the exchanges must include in their networks safety-net providers. People with HIV are likely to have Medicaid in one year and private, subsidized insurance the next as their income fluctuates because of the economy, their health, and other factors. Existing patterns of care must not be disrupted because a patient's insurance changes. Ensuring continuity of access to providers will improve health and lower health care costs by making it easier for patients to access medications and the see doctors they know—and who know their patients.
- **Exchanges must be easy to use and understand for everyone, including people with low literacy or who speak other languages:** We learned when developing the Illinois common health insurance application that literacy issues cannot be addressed at the end of the process. From the beginning, we urge you to ensure that all materials are easily usable by everyone, including people with low literacy skills. All information must be available in Spanish and other languages. Websites and forms must be designed by literacy experts and real-life users. Making materials